Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8935

Madison, WI 53708-8935

FAX #: (608) 251-3036 **Phone #: (608) 266-2112** 4822 Madison Yards Way Madison, WI 53705

E-Mail: web@dsps.wi.gov Website: http://dsps.wi.gov

DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

BOND OF PRESCRIPTION DRUG WHOLESALE DISTRIBUTOR

	POLICY NUMBER
KNOW ALL PERSONS BY THESE PRESENTS	
Til	an sole proprietorship
That(Printed Name of Individual or Entity Checl	a partnership ked at the Right) a corporation
(Filined Name of Individual of Entity Check	a corporation a limited liability company
doing business as	
	e Name, If Applicable)
	DDINCIDAL I
at(Address of Wholesale Dis	
(Address of Wholesale Dis	dibutor)
	of
(Printed I	Name of Surety)
	, as Surety,
(Address	of Surety)
a company in the authorized to de locations in de Contra	of Wissensin and held and finally have described Ohlisses of dealers.
	of Wisconsin, are held and firmly bound unto the Obligees of the bond to 00). We, the PRINCIPAL and the SURETY, bind ourselves, firmly by this
	payment more than once for the same loss or damage. The Condition of the
	or issuance of licensure to do business as a prescription drug wholesale
	tes, and applicable sections of the Wisconsin Administrative Code. The
	es or costs that relate to the issuance of a license under section 450.71,
	days after the fees or costs have become final. If the Principal or any of its
	e they might be known cause payment of fees or costs that relate to the
	tatutes, within 30 days after the fees or costs have become final during the
term of this bond, then this Obligation is void, but otherwis	se of full force and effect for the benefit of the State of Wisconsin.
1. The term of this bond shall be from the date of	f its signing by Principal and Surety for the entire period of an unexpired
	the licensee or until the Surety exercises its right of termination pursuant to
	ond up to one year after the date on which the prescription drug wholesale
distributor's license expires or the bond is terminated.	
2. Surety reserves the right to terminate this bond at	any time, such termination to be effected by Surety's giving sixty (60) days
written notice, by certified mail to: The Principal and the	Wisconsin Department of Safety and Professional Services, Office of Legal
	, ("DSPS"). The liability of Surety on this bond shall cease sixty (60) days
	cipal, or on the filing and acceptance of a new bond whichever first occurs;
	effect, except as to any liability, debt, or other obligation incurred or accrued
prior to the effective date of such termination.	
Signed and sealed this day of	
	(Principal)
R	y:
(Witness)	(Title)
((====)
	(Surety)
В	y:
	(Attorney in Fact)
(Note: Attach to this Bond a properly certified copy of the	Agent's Power of Attorney.)

#2819 (Rev. 9/11) Ch. 450, Stats.